



STATE OF ARIZONA

REQUEST FOR QUOTATION

FAX ON DEMAND

QUOTATION NUMBER DC050389DUE DATE May 9, 2005 AT 5:00 P.M. M.S.T.**MAILING ADDRESS:**

ARIZONA DEPARTMENT OF CORRECTIONS
1601 W. JEFFERSON, MAIL CODE 55302
ATTN: CENTRAL PURCHASING UNIT
PHOENIX, ARIZONA 85007

HAND DELIVERY - OVERNIGHT MAIL

ARIZONA DEPARTMENT OF CORRECTIONS
1645 W. JEFFERSON
4th FLOOR, SUITE 4401
PHOENIX, ARIZONA 85007

In accordance with A.R.S. § Title 41, Chapter 23 A.A.C.R2-7-336; quotations for the materials or services specified will be received by the Department of Corrections, at the above specified location, until the time and date cited.

Quotations must be in the actual possession of the Department of Corrections on or prior to the time and date, and at the location indicated above. Late quotations will not be considered.

All quotations must be completed in ink or typewritten, delivered to the above address. Quotations may also be returned via facsimile to 602-364-3780. Additional instructions for preparing a quotation are provided in Instruction for Quotations.

OFFERORS ARE STRONGLY ENCOURAGED TO CAREFULLY READ THE ENTIRE QUOTATION.

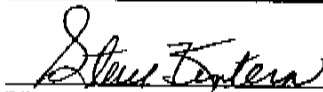
REQUESTING AGENCY: Arizona Department of Corrections - Safety & Environmental Services

MATERIAL, SERVICE AND/OR CONSTRUCTION: Respirator Fit Testers, Card Printer Kits & Adapters for Military (MSA) Facepiece

CONTRACT TYPE: Firm Fixed Price

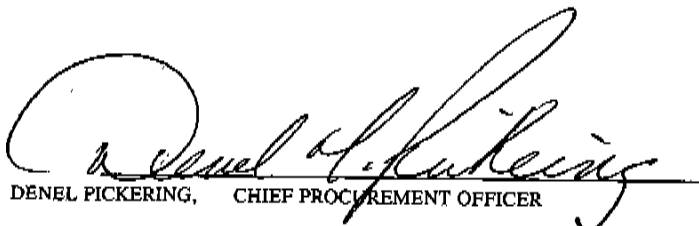
CONTRACT TERM: Single Requirement with Option for Renewal

An Equal Employment Opportunity Agency


BUYER : Steve Kentera

(602) 542-1172
PHONE

April 26, 2005
DATE


DENEL PICKERING, CHIEF PROCUREMENT OFFICER

OFFER AND ACCEPTANCE**ARIZONA DEPARTMENT
OF CORRECTIONS****QUOTATION NO.**

DC050389

OFFER

SUBMIT THE ORIGINAL OF THIS FORM TO THE DEPARTMENT OF CORRECTIONS, 1601 WEST JEFFERSON, MAIL CODE 55302, PHOENIX, ARIZONA 85007.

The Undersigned hereby offers and agrees to furnish the material, service or construction in compliance with all terms, conditions, specifications and amendments in the Solicitation and any written exceptions in the offer.

SALES TAX PERCENT: _____ %. (See Instructions for Quotations, Paragraph 4.)

Arizona Transaction (Sales) Privilege Tax

For clarification of this offer, contact:

License No.: _____

Name: _____

Federal Employer Identification

Phone: _____

No.: _____

Fax #: _____

Company Name

Signature of Person Authorized To Sign Offer

Address

Printed Name

City

State

Zip

Title

Small business certification: Vendor is _____ /is not _____ a small business (less than 100 employees _____ or has gross revenues of \$4 million or less _____.)

ACCEPTANCE OF OFFER

The Offer is hereby accepted.

The Contractor is now bound to sell the materials or services listed by the attached contract and based upon the solicitation, including all terms, conditions, specifications, amendments, etc. and the Contractor's Offer as accepted by the State.

Respirator Fit Testers, Card Printer Kits & Adapters for Military (MSA) Facepiece

This contract shall henceforth be referred to as Contract No. DC050389. The Contractor has been cautioned not to commence any billable work or to provide any material or service under this contract until Contractor has received purchase order or contract release document.

State of Arizona, Department of Corrections
Awarded this _____ Day of _____ 2005

Denel Pickering, Chief Procurement Officer

STATE OF ARIZONA

Instructions For Quotations

1. **SUBMISSION:** Quotations shall be signed where applicable and received as designated on the cover page no later than as indicated.
2. **OPENING:** This is an informal Quotation which will not be read at a public opening; however, the information may be publicly reviewed after an award.
3. **STANDARD PROVISIONS:** The State of Arizona's Uniform General Terms and Conditions where applicable, are a part of this document as if fully set forth herein. Copies of these documents are available from the Department of Corrections, Purchasing Office.
4. **TAXES:** The State of Arizona is exempt from Federal Excise Tax, including Federal Transportation Tax, Sales Tax, if any, should be indicated as a separate item.
5. **QUOTE REJECTION:** The State reserves the right to reject any, or all, Quotations, combinations of items, or lot, and to waive defects or informalities.
6. **BRAND NAMES:** Any manufacturer's names, trade names, brand names or catalog numbers used in the specifications are for the purpose of describing and establishing the general quality level, design and performance desired. Such references are not intended to limit or restrict bidding by other vendors but are intended to approximate the quality design or performance which is desired. Any Quotation which proposes like a quality, design or performance will be considered. If the description of your offer differs in any way, you must give a complete detailed description of your Quotation including pictures and literature where applicable. Unless a specific exception is made, the assumption will be that you are bidding exactly as specified on the Request for Quotation.
7. **ERASURES:** Erasures, interlineations or other modifications must be initialed by the individual signing the Request for Quotation.
8. **UNIT PRICE:** In case of error in the extension prices in the Quotation, the unit price will govern. No Quotation shall be altered, amended or withdrawn after the specific date and time for receiving Quotations. Negligence by the Vendor in preparing the Quotation confers no right for the withdrawal of the Quotation after it has been opened.
9. **PAYMENT DISCOUNT:** Payment discount periods will be computed from the date of receipt of materials or services or correct invoice, whichever is later, to the date State's warrant is mailed. Unless freight and other charges are itemized, any discount provided will be taken on full amount of invoice. Payment discounts of thirty (30) calendar days or more will be deducted from the Quotation price in determining the low quote. However, the State shall be entitled to take advantage of any payment discount offered by the Vendor provided payment is made within the discount period.
10. **SOURCE SELECTION:** This procurement is restricted to small business. A small business is one that, including its affiliates is independently owned and operated, is not dominant in the type of business it conducts, and which employs fewer than 100 full time employees or which has gross receipts of less than \$4 million in its last fiscal year.
11. **SOURCE SELECTION CLARIFICATION:** Source Selection will apply only if Small Business Requirements under A.R.S. §41-2535, R2-7-335 are applicable for dollar amounts between \$1,000.00 and \$50,000.00

SPECIAL TERMS AND CONDITIONS**SOLICITATION NO. DC050389****ARIZONA
DEPARTMENT OF CORRECTIONS
PAGE NO. 1****1 SPECIAL TERMS AND CONDITIONS****1.1 Purpose**

1.1.1 Pursuant to provisions of the Arizona Procurement Code, A.R.S. § 41-2501, ext. seq., the State of Arizona intends to establish a contract for **Respirator Fit Testers, Card Printer Kits & Adapters for Military (MSA) Facepiece**

1.2 Questions, Clarifications or Interpretations

1.2.1 Any doubt as to the requirements of the Fax on Demand or any apparent omissions or discrepancies shall be presented to the Department of Corrections Purchasing Office in writing. The Department will then determine the appropriate action necessary, if any, and issue a written amendment to the Fax on Demand.

1.2.1.1 Any questions relating to the solicitation should be sent to the following:

Address: Mailing Address: 1601 W. Jefferson, Mail
Code 55302, Phoenix, AZ 85007
Phone: 602-542-1172
Fax: 602-364-3780

1.3 Shipping Terms

1.3.1 Vendor is requested to submit their best price, Delivered, F.O.B. Destination, Freight Prepaid to the previously cited location(s).

1.4 Delivery

1.4.1 As delivery will be an important consideration in awarding this bid, vendor shall indicate their best delivery time below:

Delivery time: _____ days after receipt of Purchase Order.

1.5 Brand Name

1.5.1 Reference made to items, identified by trade name, is intended to show kind and quality of products desired and is not intended to be restrictive or limit competition. The use of brand names or manufacturer's catalog references shall be construed as quality level, method and type of performance and does not indicate that item cited is mandatory. **Products substantially equivalent to those designated shall qualify for consideration.**

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PAGE NO. 2****1.6 Descriptive Literature**

1.6.1 Vendor shall identify items, with manufacturer's name and catalog/model number. In addition, vendor shall furnish descriptive literature, including technical specifications of items other than specified and must identify any variances to facilitate comparison of bids.

1.6.2 Failure to submit descriptive literature or to identify any variances may result in bid disqualification.

1.7 Term of Contract

1.7.1 The term of any resultant contract should commence on the date of award and shall continue for a period of one (1) year thereafter, unless terminated, canceled or extended, as otherwise provided herein.

1.8 Contract Extension

1.8.1 By mutual written agreement, any resultant contract may be extended for supplemental periods of 12 months, up to a maximum of 48 months.

1.9 Price Reduction

1.9.1 A price reduction adjustment may be offered at any time during the term of a contract and shall become effective upon notice.

1.10 Warranty

1.10.1 Vendor shall submit complete warranty information. Information shall include repair/replacement policies and location of nearest factory authorized service center to the F.O.B. locations.

1.11 Manuals

1.11.1 Vendor shall supply maintenance and/or owner service manuals.

1.12 Cancellation

1.12.1 The Department of Corrections reserves the right to cancel the whole or any part of this contract due to failure by the contractor to carry out any obligation, term or condition of this contract. The Department of Corrections will issue written notice to the contractor for acting or failing to act as in any of the following:

- The contractor provides material that does not meet the specifications of this contract;

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- The contractor fails to adequately perform the services set forth in the specifications of this contract;
- The contractor fails to complete the work required or to furnish the materials required within the time stipulated in the contract;
- The contractor fails to progress in the performance of this contract and/or gives the Department of Corrections reason to believe that the contractor will not or cannot perform to the requirements of the contract.

Upon receipt of the written notice of concern, the contractor shall have ten (10) days to provide a satisfactory response to the Department of Corrections. Failure on the part of the contractor to adequately address all issues of concern may result in the Department of Corrections resorting to any single or combination of the following remedies:

- Cancel any contract;
- Reserve all rights or claims of damage for breach or any covenants of the contract;
- Perform any test or analysis on materials for Compliance with the specifications of this contract. If the results of any test or analysis find a material non-compliant with the specifications, the actual expense of testing shall be borne by the contractor;

In case of default, the Department of Corrections reserves the right to purchase materials or to complete the required work in accordance with the Arizona Procurement Code. The Department of Corrections may recover any actual excess costs from the contractor or by:

- Deduction from unpaid balance;
- Collection against the bid and/or performance bond, or;
- Any combination of the above or any other remedies as provided by law.

1.13 CRIPA

1.13.1 The Arizona Department of Corrections (ADC) entered into an agreement with the Department of Justice regarding the matter of United States of America vs. Department of Corrections, et al. (Civil Action No. 97-476-PHX-ROS). The agreement affects all correctional and non correctional staff with female inmate contact, including contract providers.

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- 1.13.1.1 The areas that impact the contract are: 1) backgrounds on existing staff; 2) stringent pre-employment screening practices for future staff; 3) pre-service and in-service training; 4) mandatory staff participation in sexual misconduct investigations; and 5) minimization of one on one situations where a female inmate and male staff are alone together.

THE AGREEMENT REQUIRES:

- 1.13.1.2 Background checks on all current non-correctional staff with female inmate contact. Any staff that has been convicted of or pled guilty to any felony charge from contact with a female inmate will be removed from their position.
- 1.13.1.3 All future staff with significant female inmate contact will require extensive pre-employment screening.
- 1.13.1.4 All ADC contractors will now be required to provide for each new applicant: 1) a complete background questionnaire to include drivers license number and record, past employment, past education, references, criminal arrest and criminal record; 2) be fingerprinted and screened by the Federal Bureau of Investigations; 3) NCIC/ACIC records check including law enforcement agency check or agencies where applicant has lived; 4) military discharge status; 5) investigation of whether applicant has ever worked in ADC prisons, and if so, whether they were the subject of investigations and allegations of inappropriate staff-inmate behavior; and, 6) tests to access personality to be scored by a professional psychologist.
- 1.13.1.5 ADC will perform the background checks at no charge to the contractor, however, the contractor is responsible for the psychological testing, analysis, and personal interviews that may be required as a result of an appeal and submission of the scoring/report for review by the Department, prior to finalization of the hiring process.
- 1.13.1.6 All current and future contract staff will be required to view a video describing inappropriate staff-inmate behavior. There will be a requirement that all staff will acknowledge in writing viewing of the video. ADC will provide the video to contract providers.

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1.13.1.7 Pre-employment training will include at least eight (8) hours of specific topics relating to inappropriate staff-inmate behavior. ADC's video will be included in the curriculum. (Subject to clarification at a later date by the parties to the agreement, the training may be made part of the New Employee training to be provided within the first sixty (60) days of employment.)

1.13.1.8 ADC will provide the selected contractor with a copy of the lesson plan for their use. The plan will include the topics and procedural changes affecting staff working with female inmates. In-service training covering inappropriate staff-inmate behavior and viewing of video. The number of hours for in-service will be determined at a later date.

1.13.1.9 ADC will also provide a copy of the lesson plan for use by the contractor.

1.14 Multiple Awards

1.14.1 In order to assure that any ensuing contracts will allow the agency to fulfill current and future requirements, the agency reserves the right to award contracts to multiple companies. The actual utilization of any contract will be at the sole discretion of the agency. The fact that the agency may make multiple awards should be taken into consideration by each potential contractor.

1.15 Serial Numbers

1.15.1 Offers must be for equipment on which the original manufacturer's serial number has not been altered in any way. Throughout the contract term, the Department of Corrections reserves the right to reject any altered equipment.

1.16 Safety Standards

1.16.1 All items supplied on this contract must comply with the current applicable Occupational Safety and Health Standards of the State of Arizona Industrial Commission, the National Electric Code and the National Fire Protection Association Standards.

1.16.2 Respirator Fit Testing Products shall be in accordance with OSHA Standards for General Industry/Personal Protective Equipment ¶1910.134 App. A.

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PAGE NO. 6****1.17 Insurance**

1.17.1 The successful contractor will be required to provide the following Certificate of Insurance within five (5) days after receipt of written notice of intent to award this contract. The contractor must furnish the State, certification from insurer(s) for coverage in the minimum amounts as stated below. The coverage shall be maintained in full force and effect during the term of this contract and shall not serve to limit any liabilities or any other contractor obligations.

GENERAL LIABILITY INCLUDING

COMPREHENSIVE FORM
PREMISES OPERATIONS
CONTRACTUAL
INDEPENDENT CONTRACTOR
PRODUCT/COMPLETED OPERATIONS HAZARD
PERSONAL INJURY
BROAD FORM PROPERTY DAMAGE
EXPLOSION AND COLLAPSE (If applicable)
UNDERGROUND HAZARD (If applicable)

**LIMITS OF LIABILITY
MINIMUM - EACH OCCURRENCE****BODILY INJURY**

Per Person	\$ 1,000,000
Each Occurrence	\$ 2,000,000
Property Damage	\$ 1,000,000

OR

Bodily Injury

AND

Property Damage

Combined	\$ 1,000,000
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Comprehensive Auto Liability Including Owned, Hired and Non-Owned	Same as above
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Umbrella Liability

Necessary if underlying
not above minimumWorker's Compensation of
Employer's Liability
Statutory (each accident)

\$ 500,000

Other, if any - personal liability

State of Arizona, its Departments, Boards and Commissions must be added as additional insurers, as required by Statute, Contract or other request. It is agreed that any insurance available to the contractor shall be primary of other sources that may be available.

It is further agreed that no policy shall expire, be canceled or materially changed to affect the coverage available to the State without thirty (30) days written notice to the State. THE INSURANCE CERTIFICATE IS NOT VALID UNLESS COUNTERSIGNED BY AN AUTHORIZED REPRESENTATIVE OF THE INSURANCE COMPANY.

Insurance

The successful contractor, will have five (5) days after receipt of written notice to submit a copy of the attached Certificate of Insurance, form DOC221A.

NOTE: No other Certificate of Insurance Form is acceptable. A copy of complete DOC221A must be forwarded to:

Arizona Department of Corrections
Central Purchasing Unit, MC 55302
1601 W. Jefferson
Phoenix, Arizona 85007

ATTENTION: Contract DC050389

1.18 Rejection of Bids

1.18.1 The Arizona Department of Corrections, at its discretion may reject any and/or all bids.

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PAGE NO. 8****1.19 Evaluation**

1.19.1 This contract shall be awarded to the lowest, responsive, responsible vendor meeting the minimum specifications and requirements set forth in this Request for Quotation, including criteria to determine acceptability such as inspection, testing, quality, workmanship, delivery and suitability for the specified purpose.

1.20 Price Adjustment

1.20.1 The Arizona Department of Corrections may review a fully documented request for a price increase only after the contract has been in effect for 120 days. The requested increase shall be based upon a cost increase to the contractor that was clearly unpredictable at the time of the offer and is directly correlated to the price of the product concerned. The Arizona Department of Corrections shall determine whether the requested price increase or an alternate option, is in the best interest of the State.

1.21 Eligible Agencies

1.21.1 Any contract resulting from this solicitation shall be for the exclusive use of the Arizona Department of Corrections.

1.22 Rules and Regulations

1.22.1 Attention of the bidders is called to the requirements of the document Rules and Regulations for Non-Employees of the Department of Corrections in an Arizona State Prison Complex, which are bound herein and which shall be adhered to in all respects.

1.22.2 The last page of the Rules and Regulations document requires a signature, acknowledging having read and understood both of the above mentioned documents. This document shall be furnished to the successful vendor.

1.22.3 Should the owner require signatures of other parties such as subcontractor or persons directly or indirectly employed by the contractor, it shall be the contractor's responsibility to obtain such signatures. The signed document must be submitted within ten (10) days of notification of intent to award.

1.23 Invoicing

1.23.1 A legible and detailed invoice shall be provided by the vendor upon delivery. The invoice shall reference at a minimum, the Department's purchase order number, description, part number and the correct discounted price including applicable taxes.

1.24 Packaging

1.24.1 All parts shall be delivered in the manufacturer's individual original standard package clearly marked as to part number and contents.

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PAGE NO. 9****1.25 Award**

1.25.1 It is the intention of the Department of Corrections to award a single contract for all of the proposed work.

1.26 Millennium Compliance

1.26.1 Hardware, Software, or Firmware Contracts:

1.26.1.1 Notwithstanding any other warranty or disclaimer of warranty in this contract, the contractor warrants that each hardware, software, and firmware product delivered under this contract shall be able to accurately process date/time data (including but not limited to calculating, comparing, and sequencing) from, into, and between the twentieth and twenty-first centuries, and the years 1999 and 2000 and leap year calculations, to the extent that other information technology utilized by the State in combination with the information technology being acquired under this contract properly exchanges date/time data with it. If this contract requires that the information technology products being acquired perform as a system, or that the information technology products being acquired perform as a system in combination with other State information technology, then this warranty shall apply to the acquired products as a system. This warranty shall survive the expiration or termination of this contract. The remedies available to the State for breach of this warranty shall include, but shall not be limited to, repair and replacement of the information technology products delivered under this contract.

In addition, the defense of force majeure shall not apply to the failure of the contractor to perform any specification requirements as a result of any date-related data Year 2000 issues.

SPECIAL TERMS AND CONDITIONS**SOLICITATION NO.** DC050389**ARIZONA**
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PAGE NO. 10**1.26.2 Contracts not involving Hardware, Software or Firmware:**

1.26.2.1 Notwithstanding any other warranty or disclaimer of warranty in this contract, the contractor warrants that all products delivered and all services rendered under this contract shall comply in all respects to performance and delivery requirements of the specifications and shall not adversely affected by any date-related data Year 2000 issues. This warranty shall survive the expiration or termination of this contract. In addition, the defense of force majeure shall not apply of the contractor's failure to perform specification requirements as a result of any date-related data Year 2000 issues.

SPECIFICATIONS

SOLICITATION NO. DC050389

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2 TASK

- 2.1 Vendor is requested to provide pricing to furnish and deliver, Respirator Fit Testers, Card Printer Kits & Adapters for Military (MSA) Facepiece to the following Arizona Department of Corrections location:

Arizona Department of Corrections
1645 W. Jefferson
Phoenix, AZ 85007
Attn: Barry Keith / Room 4102

3 SCOPE

- 3.1 The intent of this solicitation is to allow the Arizona Department of Corrections to enter into a contract(s) for the procurement of the following specified products, as specified in General Specifications/Requirements, at a fixed price for a twelve (12) month period.

4 GENERAL SPECIFICATIONS/REQUIREMENTS

- 4.1 Respirator Fit Tester shall meet the minimum requirements listed below:
- 4.1.1 Size: 9.5 in x 7.5 in. X 5.5 in
 - 4.1.2 Fit Factor Range: 1 to greater than 10,000
 - 4.1.3 Concentration Range: 0.01 to 5 x 10 particles/cm³
 - 4.1.4 Particle size range: 0.02 to greater than 1 micrometer
 - 4.1.5 Typical Fit Factor Accuracy: $\pm 10\%$ of reading
 - 4.1.6 Minimum Exercise Duration: 30 sec
 - 4.1.7 Temperature Range: Operation - 32 to 100°F (0 to 38°C), Storage: -40 to 160°F (-40 to 70°C)
 - 4.1.8 Flow Rate
 - 4.1.8.1 Sample 100 cm³/min
 - 4.1.8.2 Total 700 cm³/min (nominal)
 - 4.1.9 Alcohol
 - 4.1.9.1 Hours per charge: 8 hours at 70° F (21°C)
 - 4.1.9.2 Alcohol type: 99.5% reagent grade isopropyl
 - 4.1.10 RS-232 Output Baud Rate: User-selectable; 300, 600, 1200, 2400, 9600, (factory set at 1200)
 - 4.1.11 Pass/Fail Setting: User-selectable: 0, 100, 250, 500, 1000, 1250, 1667, 2000, 4000, 5000, 6667, 10000 with capability for other values to be programmed by user)
 - 4.1.12 Factory Recalibration Interval: One year
 - 4.1.13 Warranty: Two year on parts and labor

SPECIFICATIONS**SOLICITATION NO.** DC050389**ARIZONA**
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PortaCount Respirator Fit Tester, Model 8020 or Equal

Vendor Offers:

Mfg: _____

Model: _____

4.2 Card Printer Kits shall meet the minimum requirements listed below:

4.2.1 Size: 3.375 in. X 2.125 in

4.2.2 Card Input Hopper Capacity: 100 cards

4.2.3 Card Output Hopper Capacity 30 cards

4.2.4 Computer Interface USB 1.1 (USB 2.0 compatible)

4.2.5 Print Method: Dye-Sublimation/Resin Thermal Transfer

4.2.6 Print Speed

4.2.6.1 Monochrome: 7 seconds per card / 514 cards per hour

4.2.6.2 Color: 27 seconds per card / 133 cards per hour

4.2.7 Resolution: 300dpi

4.2.8 Power Requirements: 100-240 VAC Auto Sensing, 3.3 A, 50/60 Hz

4.2.9 Must be compatible with the Respirator Fit Tester as specified in 4.1

Fargo Electronics Card Printer and Kit, Model 8907 or Equal

Vendor Offers:

Mfg: _____

Model: _____

4.3 Military Facepiece Adapters (MSA) shall meet the minimum requirements listed below:

4.3.1 Must be able to permit quantitative fit testing with no shared test respirators.

4.3.2 Must allow integrity checks while being fit tested.

4.3.3 Must eliminate need to sanitize between fit test

4.3.4 Parts that are exposed to exhaled air must be disposable.

TSI Adapter for Military, Model 8025-29 or Equal

Vendor Offers:

Mfg: _____

Model: _____

- 4.4 This Solicitation No. DC050389 will be the only formal contract that will be issued. The Arizona Department of Corrections will not enter into or sign any other form of contract or agreement(s) from the vendor of award.

PRICE SHEET**SOLICITATION NO. DC050389****ARIZONA
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PAGE NO. 13****5 PRICING**

		<u>QTY</u>	<u>UNIT PRICE</u>	<u>EXTENDED PRICE</u>
5.1	Respirator Fit Tester	4	\$ _____	\$ _____
5.2	Card Printer & Kit	2	\$ _____	\$ _____
5.3	Adapter for Military (MSA) Facepiece	7	\$ _____	\$ _____
	Sub Total			\$ _____
	Tax			\$ _____
	Total			\$ _____

NOTICE:


The vendor acknowledges that all products delivered and all services rendered under any contract resulting from this solicitation shall comply in all respects to performance and delivery requirements of the specifications and shall not be adversely affected by any date-related Year 2000 issues. The vendor further acknowledges that the defense of force majeure shall not apply to its failure to perform specification requirements as a result of any date-related data Year 2000 issues.

SALES TAX PERCENT: _____%, (See Uniform Instructions to Offerors for Formal Solicitation, Paragraph 3.11)

PROMPT PAYMENT DISCOUNT: The price(s) quoted herein can be discounted by: _____%, if payment is made within _____ days.

PLEASE CHECK THE APPROPRIATE SELECTION BELOW THAT APPLIES TO YOUR COMPANY:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> 0. Non-Small/Non-Minority/Non-Disabled | <input type="checkbox"/> 1. Small Business | <input type="checkbox"/> 2. Minority Owned Business | <input type="checkbox"/> 3. Women Owned Business |
| <input type="checkbox"/> 4. Owned By Disabled Individual | <input type="checkbox"/> 5. Small Business/Minority Owned | <input type="checkbox"/> 6. Small Business/Women Owned | <input type="checkbox"/> 7. Small Business/Disabled Owner |
| <input type="checkbox"/> 8. Minority-Women Owned Business | <input type="checkbox"/> 9. Disabled-Minority Owner Business | <input type="checkbox"/> 10. Disabled-Women Owned Business | <input type="checkbox"/> 11. Small Business/Minority-Women Owned |
| <input type="checkbox"/> 12. Small Business/Disabled-Minority Owned | <input type="checkbox"/> 13. Small Business/Disabled-Minority-Women Owned | | |

	CERTIFICATE OF INSURANCE		ARIZONA STATE DEPARTMENT OF CORRECTIONS 1601 W. Jefferson MC #55302 PHOENIX, ARIZONA 85004		
	SOLICITATION NO. DC050389				
	VENDOR		COMPANY LETTER	COMPANIES AFFORDING COVERAGE	Current A.M. Best Rating
NAME AND ADDRESS OF INSURANCE AGENCY:		A			
		B			
NAME AND ADDRESS OF INSURED:		C			
		D			
This is to Certify that the Policies of Insurance listed below have been issued to the Insured Named above for the Policy period indicated.					
CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YR)	POLICY EXPIRATION DATE (MM/DD/YR)	LIMITS (.000)
	GENERAL LIABILITY <input checked="" type="checkbox"/> Commercial General Liability <input checked="" type="checkbox"/> Occurrence- Claims Made <input checked="" type="checkbox"/> Owner's & Contractors Prot. <input checked="" type="checkbox"/> Per Project Product/Completed Operations				Commercial Aggregate Products-Comp/OP AGG. \$ _____ Personal & ADV. Injury \$ _____ Each Occurrence \$ _____ Fire Damage (Any One Fire) \$ _____ Med. Expenses (Any One Person) \$ _____
	AUTOMOBILE LIABILITY Any Auto All Owned Autos All Owned Autos (Other than Priv. Pass) Scheduled Autos Hired Autos Non-Owned Autos Garage Liability				Bodily Injury (Per Person) \$ _____ Bodily Injury (Per Accident) \$ _____ Property Damage \$ _____

NOTICE:

The vendor acknowledges that all products delivered and all services rendered under any contract resulting from this solicitation shall comply in all respects to performance and delivery requirements of the specifications and shall not be adversely affected by any date-related Year 2000 issues. The vendor further acknowledges that the defense of force majeure shall not apply to its failure to perform specification requirements as a result of any date-related data Year 2000 issues.

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PROMPT PAYMENT DISCOUNT: The price(s) quoted herein can be discounted by: _____%, if payment is made within _____ days.

PLEASE CHECK THE APPROPRIATE SELECTION BELOW THAT APPLIES TO YOUR COMPANY:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> 0. Non-Small/Non-Minority/Non-Disabled | <input type="checkbox"/> 1. Small Business | <input type="checkbox"/> 2. Minority Owned Business | <input type="checkbox"/> 3. Women Owned Business |
| <input type="checkbox"/> 4. Owned By Disabled Individual | <input type="checkbox"/> 5. Small Business/Minority Owned | <input type="checkbox"/> 6. Small Business/Women Owned | <input type="checkbox"/> 7. Small Business/Disabled Owner |
| <input type="checkbox"/> 8. Minority-Women Owned Business | <input type="checkbox"/> 9. Disabled-Minority Owner Business | <input type="checkbox"/> 10. Disabled-Women Owned Business | <input type="checkbox"/> 11. Small Business/Minority-Women Owned |
| <input type="checkbox"/> 12. Small Business/Disabled-Minority Owned | <input type="checkbox"/> 13. Small Business/Disabled-Minority-Women Owned | | |